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November 16, 2005

To: Assistant Commissioner for Patents FAX # (571) 273-8300
Washington, D.C. 20231

Attention: Examiner Kirsten Jolley
Group Art Unit 1762
Phone Number: (571) 272-1421

Re: **OFFICIAL RESPONSE UNDER 37 CFR §1.111**

The following is a(n) 17 - page OFFICIAL RESPONSE to an Office Action filed on August 16, 2005, in the below-identified U.S. Patent Application.

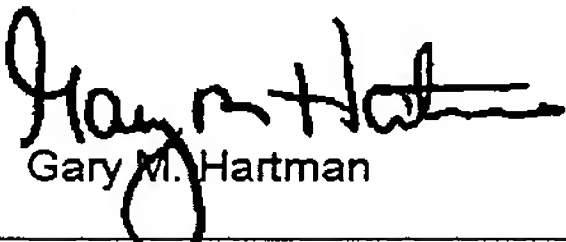
Application No.	:	10/605,858	Confirmation No. 2857
Applicant	:	Dong-Sil NMN Park et al.	
Filed:	:	October 31, 2003	
TC/Art Unit:	:	1762	
Examiner	:	Kirsten Jolley	

Docket No. : 132855

Submitted by:
Domenica N.S. Hartman
Reg. No. 32,701

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**RECEIVED
CENTRAL FAX CENTER****NOV 16 2005****PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No. :	10/605,858	Confirmation No. 2857
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Examiner :	Kirsten Jolley	
Docket No. :	132855	
Customer No. :	30952	

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT UNDER 37 CFR §1.111

This paper is being filed in response to an Office Action dated August 16, 2005 (Paper No. 20050811). Please charge fees incurred in the filing of this response to General Electric Company, Deposit Account No. 07-0865, in accordance with the attached Fee Transmittal form.

TABLE OF CONTENTS:

Amendments to the Claims	Starting on page 2
Remarks	Starting on page 11
Fee Transmittal form	Following page 16

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FEE TRANSMITTAL for FY 2004

Effective 10/31/2003. Patent fees are subject to annual revision.

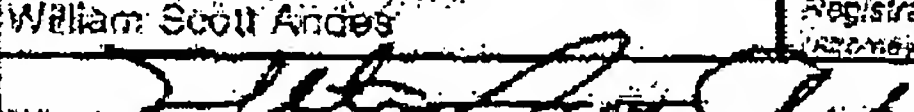
☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 150.00
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Complete if Known	
Application Number	10/605,858
Filing Date	10/31/2003
First Named Inventor	Park
Examiner Name	Kirsten Jolley
Art. Unit	1762
Attorney Docket No.	132855

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																														
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 07-0565 Deposit Account Name: General Electric Company Title Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.	3. ADDITIONAL FEES Large Entity - Small Entity <table border="1" style="width: 100%;"><thead><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee of oam</td><td></td></tr><tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr><tr><td>1804</td><td>920</td><td>1804</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>1805</td><td>1,840</td><td>1805</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr><tr><td>1253</td><td>850</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr><tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>1403</td><td>280</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr><tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Total Claims: 33 Independent Claims: 3 Multiple Dependent: 30 Extra Claims: 3 Fee from below: 50.00 Fee Paid: 150.00 SUBTOTAL (2) (\$)																																							
150.00																																							

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	William Scott Andes	Registration No.	33,582
Signature		Telephone	513/243-5965
		Date	November 16, 2005

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